

News &

Reporter

Chester, SC

Circ. 6415

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# Medicaid ride rules change

### BY STEPHEN GUILFOYLE & KERI TODD

Ridiculous, Mike Wessinger said. Absolutely ridiculous.

The director of Senior Services and the Chester Connector had been asked to help get a young man to a medical appointment in Charleston, a Medicaid service it has been providing for years.

But instead of driving the young man to Charleston for a day-long trip, Chester Connector was told just to take him to Rock Hill — to the Greyhound bus stop, to

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# Driver makes long rides fun, Page 10-A.

be precise.

The young man, Dontrayous Douglas, had an appointment to have his liver checked. He had a transplant four years ago, and has to get it checked twice a year, if everything is going well.

The appointment was for a visit on Thursday, June 28. But following the schedule prepared by MTM, a transport scheduling company, the Chester Connector would have to pick Douglas up the Wednesday night before to get him and his mother to Rock Hill for his bus trip. They would have had to ride the bus all night long, then take a cab from the Charleston bus terminal to the Medical University of Charleston.

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Dontrayous Douglas, an 18-year-old from Great Falls, gets into a Chester Connector van in Charleston with his mother, on his way back home after a doctor's appointment. He had faced the prospect of a three-day trip under a new broker system designed to save taxpayer's money.

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After the appointment, the Great Falls teen and his mom would have to take another cab back to the bus station, wait to catch another all-night Greyhound bus back to Rock Hill.

On Friday morning after his visit, the Chester Connector would have picked the two up and returned them home.

A three-day trip, riding a van, bus and a cab both ways, for a doctor's appointment that lasted not an hour.

Wessinger has seen a lot of things like this since the MTM assumed scheduling control of Medicaid transports.

But this was the trip that made Wessinger say no.

"The trip is bad enough as it is," he said. (See related story, Great Falls Reporter.)

For years, Senior Services has been providing transportation for people like Dontrayous. It has driven Dontrayous to Charleston for years.

"I just said we'll take him," he said. "We'll deal with it later.

"That way they will only have a day tied up in this appointment instead of three," Wessinger said.

In previous years, Senior Services in Chester County provided this transportation under Medicaid, working directly with patients.

But the state Department of Health and Human Services changed the program, ostensibly to save money.

"They really weren't looking out for the patient when they changed it," Wessinger said.

People like Dontrayous wanting Medicaid transports now have to call an 800 number. That puts them through to MTM of St. Louis, Mo., one of two out-of-state, private companies that now schedules transports in South Carolina, sup-

posedly looking for the cheapest trip for taxpayers' money.

Douglas' mother appreciated Wessinger's offer to take them to Charleston rather than try to follow the three-day itinerary planned by MTM.

She said an early morning trip is something she can handle.

A three-day road trip? Spend mostly overnight on a bus?

"When I saw the bus schedule I thought I was going to have to cancel the appointment," she said.

She didn't.

It isn't just the Douglases who are being treated this way, Wessinger said.

People with serious mobility problems who used to get rides in ambulances are now being put in cars and vans instead.

To save money, he says.

But what it is doing, he says, is creating a hardship for county residents here.

Wessinger admits it does save money, but the savings come at a high price of inconvenience to the people who need the service.

He would have to charge 88 cents a mile for the trip to Medicaid. That's about \$578 for a 600 mile round trip.

But people in wheelchairs are sent cabs instead of wheelchair vans.

"(The companies) are about profit," he said.

Senior Services and the Chester Connector used to be able to provide some extra services. They did charge patients for a ride, but at reduced costs.

MTM, though, is sticking to the rules.

The company arranged the trip for Dontrayous and his mother. But his grandmother used to go along with Senior Services. She wouldn't have been able to ride along anymore had she been up to the trip, with the new program.

Wessinger said he had been going along with all the state and MTM were doing until he saw the itinerary for News & Reporter Chester,SC Circ. 6415 From Page:

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the Douglases trip to Charleston.

Something that the Chester Connector could handle for the family in a day — still a long hard trip — would have been a threeday road trip, mostly on the highways at night.

State Rep. Dennis Moss, D-Gaffney, heard about similar situations in Cherokee County and tried to get the S.C. Legislative Audit Council to look into the companies scheduling Medicaid transports, but his effort failed.

A state senator however offered a bill that passed, to set up a review committee, according to Jeff Stensland, a spokesman for the state Department of Health and Human Services, which oversees Medicaid.

He said the state has been trying to combat an increasing costs in the transport systems.

Over a four-year period, costs went up 300 percent for non-emergency transports, Stensland said. The increases came despite a corresponding increase in

usage.

"We were transporting the same number of people," he said. The agency attributed the increase to waste, fraud and abuses by some of the providers.

The state looked at the "broker" model for a time,

put out a request for proposals and selected two companies. MTM was selected for the Upstate of South Carolina, including Chester County. Logisticare handles the rest of the state.

The system was overburdened immediately when the new system went into place, he said. It started May 1, but before it began, the state sent letters to everyone on Medicaid. A lot of people who did not know they were eligible for transports realized they could, and applied.

And the kinks are being worked out, Stensland said.

The state is willing to listen to complaints from people and talks to the brokers when they hear a complaint

The state wants to make sure everyone gets to their appointments on time, he said, but the state also has to get the best "bang for its buck."

He said he could not talk about specific cases, not knowing about them, without a signed waiver, given federal medical privacy laws.

"We don't want to place an undue burden on them," he said.

"We have had some complaints, which we are logging," Stensland said.

He said there were a lot of cases where people would get ambulances that didn't need them. Some people who ride in wheelchairs don't need ambulances, he said, but should be getting rides in wheelchair vans.

"I haven't heard about cabs," he said.

The state has seen a large increase in the use of wheel-chair vans since it started the program, Stensland said.

The program is being reviewed inside the agency, he said, as well as by the legislature-created committee.

Wessinger said he did inform MTM that he would be taking the Douglases to Charleston.

"They said they were OK with that," he said. So he isn't expecting any repercussions from his decision.

But Stensland said that anyone who contracts with the state is required to work with the brokers now that it is in the system.

"They acted like they were doing us a favor," Wessinger said of MTM. But he doesn't want to save money at an inconvenience to the patients and their families, he said.

He said he noticed, also, that state Lt. Gov. Andre Bauer is going to have a hearing in Greenville next week on Medicaid transport issue.

"I don't know what he's heard about this," he said. "But I'd be interested to find out."

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Dontrayous Douglas sits in a waiting room at Medical University of South Carolina waiting for a check-up on his liver.